

The National Consortium for Physical Education for Individuals with Disabilities (NCPEID) recognizes the role of physical education for children with disabilities, aged 3-21, in the development of “physical and motor fitness, fundamental motor skills and patterns, skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports)” (34 C.F.R.300.39(b)(2)). Therefore, we advocate for physical education services that: a) are appropriate to meet the unique learning needs of children with disabilities, including “special physical education, adapted physical education, movement education, and motor development” (34 C.F.R.300.39(b)(2)), b) address the psychomotor, cognitive, and affective learning outcomes of physical education, and c) are provided by appropriately credentialed physical educators.

IDEA uses the term “specially designed instruction” and defines it as “adapting, as appropriate to the needs of an eligible child under this part, the content, methodology, or delivery of instruction” (34 CFR §300.39(b)(3)). **It is the position of the NCPEID that specially designed instruction is adapted physical education instruction, and specially designed physical education services are adapted physical education services.**

Specific to physical education for children with disabilities, States and their public agencies:

- Must ensure appropriate implementation of the physical education mandates of the Individuals with Disabilities Education Improvement Act of 2004 (PL 108-446; hereafter referred to as IDEA).
- Shall provide physical education as a **direct instructional service** as a part of a child’s special education program, from ages 3-21 years, that is delivered within the least restrictive environment (see Office of Special Education Programs [OSEP] Dear Colleague Letters to [Tymeson](#), [Kelly](#) and [Tymeson](#)).
- Shall **provide adapted physical education** services (APE) when it is determined, through individualized assessment by a physical educator (34 CFR §300.304(c)(1)) and the IEP process, that the child’s learning needs require modifications to the general physical education curriculum (e.g., reductions in psychomotor, cognitive, or affective learning expectations; modified assessment methods; specialized instructional strategies; etc.) (34 CFR §300.39(b)(3)).
- Shall **document APE services** in the IEP, including individualized annual goals and student progress *aligned* to state standards (i.e., it is *not* required that the child *meet* a grade level state standard; however, progress towards annual goals and state standards must be documented).
- Shall not substitute physical therapy, occupational therapy, or other related services for APE services (see OSEP [Dear Colleague Letter to Irby](#)).
- Shall include the physical educator as a member of the IEP team involved in developing the student’s annual IEP/special education program (34 CFR §300.321).
- Shall ensure that APE services are provided by an **appropriately credentialed physical educator** [e.g., nationally certified adapted physical educator (CAPE), state endorsed APE teacher, etc.].
- Shall document the extent to which the child can participate with peers without disabilities across three main areas of the child’s school life (general education, extracurricular, and nonacademic activities) including interscholastic sport (see [OSEP Office of Civil Rights Dear Colleague Letter](#)).
- Shall provide APE services to students with disabilities who are eligible through Section 504 of the Rehabilitation Act.

The following information provides additional support for the aforementioned position statements:

Physical Education Mandates of IDEA

- IDEA states that “physical education services, specially designed, if necessary, must be made available to every child with a disability receiving Free and Appropriate Public Education (FAPE), unless the public agency enrolls children without disabilities and does not provide physical education to children without disabilities in the same grades” (34 CFR §300.108).
- If specially designed physical education, more commonly known as *adapted physical education*, “is prescribed in a child’s IEP, the public agency responsible for the education of that child must provide the services directly or make arrangements for those services to be provided through other public or private programs” (34 CFR §300.108).
- IDEA regulations clarify that specially designed physical education is an individually determined special education service *not* a grade level requirement in the Federal Register of August 14, 2006 (see page 46583 regarding section 300.108). As such, children with disabilities, including preschool ([Dear Colleague Letter to Tymeson](#)) and transition aged students ([Dear Colleague Letter to Kelly](#)) should receive APE services as prescribed in their IEP, regardless of whether physical education is offered to their peers without disabilities or whether they have completed “grade level requirements”.
- As a part of special education, local education agencies should ensure physical education is included in state compliance evaluations.

Physical Education as a Direct Instructional Service

- IDEA defines special education as “specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including— (i)

Instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and (ii) Instruction in physical education” (34 CFR §300.39). As such, physical education is a *direct instructional service* within special education; it is *not* a related service.

- OSEP further clarified this mandate of physical education as a direct instructional service in the [Dear Colleague Letter to Tymeson \(2021\)](#).
- Adapted physical education is a direct instructional service (not a class) that must, and can, be provided in any education setting along the least restrictive environment (LRE) continuum.
- Physical education services, specially designed if necessary, *must* be made available to every child with a disability receiving FAPE. As such, APE is a direct instructional service within special education that is required by law, and LEAs must provide APE services if there is identified student need.
- Related services *may* be provided if a student with a disability needs the service to benefit from special education. While related services are important to student success, none of these services (e.g., physical therapy) satisfy or can substitute for physical education instruction/services (general or adapted). LEAs substituting related services to satisfy physical education are in violation of IDEA.

Physical Education Services Determined through Individualized Assessment

- IDEA clearly states that the evaluation procedures must assess the child in all areas related to the suspected disability and must be sufficiently comprehensive to identify all of the child’s special education and related service needs (34 CFR §300.304). Given that physical education, which is a part of

special education, has learning outcomes across the psychomotor, cognitive and affective learning domains, students must be assessed across all three learning domains to measure their performance within the physical education curriculum and determine their educational needs.

Considering only motor delays when determining eligibility for APE services is an inappropriate practice, as the physical education curriculum explicitly defines learning expectations in all three learning domains.

- Additionally, IDEA requires that trained and knowledgeable personnel must conduct any assessments and evaluation materials used to assess a child (34 CFR §300.304(c)(1)). As such, an appropriately trained physical educator must be involved in the assessment of a child with a disability when physical education needs are being determined.
- While there is no federally mandated standard for qualification for APE services, it is common practice to use the following criteria: a score of 1.5 standard deviations below the mean on a standardized motor test; performance that is 2 or more years delayed; and/or an inability to be independently safe and/or successful in the general physical education environment due to physical, cognitive, or behavioral needs.
- Once the IEP team determines that a child needs APE services (i.e., specially designed instruction), a physical educator must also be involved as an IEP team member in determining the appropriate placement(s), development of goals (and objectives if warranted) and to ensure the program is implemented as prescribed.

Documentation of Annual Goals and Student Progress in Physical Education

- Both IEPs and state standards include clearly written educational objectives for students to master; however, they are distinct in their purposes of guiding and

enhancing a child's learning experience.

- An IEP includes *individualized* goals to guide a *single* student's learning to increase competency and mastery of knowledge and skills. The following must be provided in a child's IEP to ensure progress is being made towards each IEP goal: present level of performance, annual goals and objectives, implementers, special education and related services, percentage participation in regular education programs, schedule of review, and transition plan ([OSEP, 2011](#)).
- State standards are *normative* objectives for a *group* of students of similar age/grade level based upon predetermined markers of expected mastery knowledge and skills. While IEPs and state standards are separate, they are complementary to one another, and should be utilized to inform the other for student mastery of knowledge and skill. Furthermore, IEP goals are intended to *align* with state standards, but it is *not* required that the child must *meet* a grade level state standard. Considerations should be accounted for and documented in the IEP along with the student's progress towards meeting the IEP annual goals and state standards ([National Center for Learning Disabilities](#)).

Involvement of the Physical Educator in the IEP Process

- IDEA requires IEP team members to be in attendance if their curricular area is being discussed, unless released in writing by parents and district (34 CFR §300.321). As such, physical educators must be present at IEP meetings when physical education is being discussed (e.g., annual IEP meetings) unless they are released in writing by the parents and the district. **If the physical educator is released from the meeting, they must still fulfill obligations to the student and the IEP team including reporting data specific to progress toward APE goals and/or performance within the physical**

education curriculum.

- Physical educators (general or adapted physical educators) fulfil critical roles in the IEP process to include communicating, and documenting on the IEP, the student's present level of performance, placement for services, needed supports, needed accommodations and modifications, and goals and evaluation procedures for physical education (Kowalski, Lieberman, and Daggett, 2006).
- Physical educators are also responsible for documenting a student's progress toward the IEP goals and the physical education standards (Tripp & Zhu, 2005).

Qualifications of the Physical Educator Responsible for APE Services

- Per IDEA, all special education and related service personnel must be certified, endorsed, or licensed in the area or areas of assignment in accordance with 34 CFR §300.156; as well as with corresponding state education codes or appropriate state agency credentials.
- While some states require a state-level APE or PE endorsement or certification to provide APE services, others recognize the national Certified Adapted Physical Educator (CAPE) credential. Michigan, for example, requires either the state APE endorsement or the CAPE for educators providing APE services.
- A CAPE is a state-certified physical educator who has successfully passed the [Adapted Physical Education National](#)

Additional Resources:

- National Consortium for Physical Education for Individuals with Disabilities: www.ncpeid.org
- Adapted Physical Education National Standards: www.apens.org
- [National Consortium for Physical Education for Individuals with Disabilities. \(2020\). Adapted Physical Education National Standards. \(3rd ed\). Human Kinetics, Champaign, IL.](#)

[Standards \(APENS\)](#) Examination and met the appropriate certifying criteria, including valid teaching certification/license in physical education in their state and required college coursework in APE.

- Similar to national standards for physical education teachers, the NCPEID developed the APENS as professional standards for adapted physical educators in collaboration with the National Association of State Directors of Special Education (NASDSE) and Special Olympics International.
- The [APENS](#) represent the knowledge base necessary for adapted physical educators to provide quality APE services.

Involvement in Interscholastic and Extracurricular Activities

- [Need to address still](#)

APE Services through Section 504

- APE services may be provided to students with disabilities who are eligible for educational services under Section 504 of the Rehabilitation Act of 1973. Section 504 requires that LEAs provide a free appropriate public education (FAPE), including physical education, to qualified students with disabilities ([Office of Civil Rights, 2020](#)).
- As with the IEP, the physical educator should be a part of evaluations for determining student need as well as discussions and planning of a qualified student's 504 plan.